

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

Serial No.

10 574575

Filing Date

Attorney

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
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49							99						
50							100						
TOTAL IND.		↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS							TOTAL CLAIMS						

Handwritten notes in the form include: '11', '35', '46' in the first table's DEP column; '11', '35', '46' in the second table's DEP column; and '11', '35', '46' in the first table's TOTAL DEP row. There are also various arrows and symbols indicating calculations or corrections.

PTO-1346 (REV. 8/83)

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